Form 1040 For the year Jan 1 - Dec		S. Individual Income Tax 011, or other tax year beginning	2011, ending	OMB No. 1545-0074	•	<del></del>	separate instr	
Your first name	31, 21	Mi	Last name		Your	socia	l security number	
JUAN D. REY	ES						0937	
If a joint return, spouse'		name MI	Last name		Spor	se's	social security num	ber
CATHERINE R	EYE	S					3741	
Marca 11		eet). If you have a P.O. box, see instructions.		Apartment no		Ma	ske sure the SS	N(s) above
72 DARTMOUT	H S	TREET				a	nd on line 6c a	re correct.
City, town or post office.	If you	have a foreign address, also complete spaces be	low (see instructions).	tate ZIP code	Pi	esid	iential Election	Campaign
FOREST HILL	S,	NY 11375					il you, or your spo	
oreign country name		Fo	reign province/county	Foreign postal cod		belo	nt \$3 to go to this fo w will not change yo	our tax or
					refun	d.	X You X	Spouse
Cilina Status	1	Single	4	Head of househousehousehousehousehousehousehouse	ld (with q	ualif	ying person). (	See
Filing Status	2	X Married filing jointly (even if only one ha	d income)	but not your dep	endent, ei	nter	this child's	1
	3	Married filing separately. Enter spouse's		name here. 🟲				
Check only one box.	_	name here	5	Qualifying widow	(er) with	depe	endent child	
	61	X Yourself. If someone can claim	vou as a dependent.	o not check box 6a			Boxes check	
Exemptions		X Spouse	-				No. of childre	
			(2) Dependen		te (	4) 🗸	on 6c who:	
	(	: Dependents:	social securi	y relationship	ch	ild un age I lifying ild tax e ins	der lived with you	
		(1) First name Last na	number	to you	ch	ld tax	cr did not trs) live with you	
		CONTRACTOR CONTRACTOR				$\overline{\sqcap}$	due to divorc	e
f more than four						Ħ	(see instrs)	
dependents, see	*******					П	Oegendents on 6c not entered above	
nstructions and	7 —	- William - Will				П	Add numbers	
Lieck Here	لـ	Total number of exemptions claimed					on lines	<b>▶</b> 2
		Wages, salaries, tips, etc. Attach Fo				T	7	
ncome	8,	Taxable interest. Attach Schedule B	if required				8a	292.
		Tax-exempt interest. Do not include						
Attach Form(s)		Ordinary dividends. Attach Schedule					9a	
1-2 here. Also		Qualified dividends	11	( ) b		_0		
ttach Forms V-2G and 1099-R	10	Taxable refunds, credits, or offsets of	of state and local income	(e taylets/)\\	ク	_	10	
tax was withheld.		Alimony received					11	
you did not	12	Business income or (loss). Attach Sc		······································	<u> </u>	-	12	
el a W-2,	13	Capital gain or (loss). Att Sch D if reqd. If not				-	14	
ee instructions.		Other gains or (losses). Altach Form		b Taxable amount		-	15b	2,188.
		IRA distributions		b Taxable amount		-	16b	25,000.
,		Rental real estate, royalties, partner				·	17	
veloco bul do	18	Farm income or (loss). Attach Sched	tule F			.	18	
nclose, but do ot attach, any	19	Unemployment compensation				. 1	19	
ayment. Also,	20 a	Unemployment compensation	34,080.	b Taxable amount		. 2	20 b	6,442.
lease use orm 1040-V.	21					_ 2	21	
	22	Other income  Combine the amounts in the far right column f	or lines 7 through 21. This i	your total income		<b>&gt;</b> 2	22	33,922.
	23	Educator expenses		. 23		_		
Adjusted	24	Certain business expenses of reservists, perfor government officials. Attach Form 2106 or 210	ming artists, and fee-basis	24				
iross ncome	25	Health savings account deduction. A	ttach Form 8889	25		-		
COME	26	Moving expenses. Attach Form 3903	COOL STATE OF STATE O	The second secon		7		
	27	Deductible part of self-employment tax. Attach	Schedule SE	27				
	28	Self-employed SEP, SIMPLE, and qu						
	29	Self-employed health insurance dedi		. 29		_	143	Exhib
	30	Penalty on early withdrawal of saving		. 30		-10		Р
	31 a	Alimony paid b Recipient's SSN		31 a		4		
	32	IRA deduction		. 32				
	33	Student loan interest deduction		33	****			
		Tuition and fees. Attach Form 8917.		34		-		
	35	Domestic production activities deduction. Attai Add lines 23 through 35	ch Form 8903	35		7.	36	0.
	36					- 1 -		٠.

Form 1040 (2011)	JUAN D. AND CATHERINE REYES						0937 Page 2
	38 Amount from line 37 (adjusted gross income).					38	33,922.
Tax and Credits	39 a Check X You were born before January 2,			Total boxes			
Cieuits	if: X Spouse was born before January		Blind.	checked ► 39a	2		
Standard	b If your spouse itemizes on a separate return or you were a di		u heck here .	> 391	, 11		
Deduction	40 Itemized deductions (from Schedule A) or your standard d					40	27,854.
for	41 Subtract line 40 from line 38.					41	6,068.
<ul> <li>People who</li> </ul>	42 Exemptions. Multiply \$3,700 by the number on					42	7,400.
check any box on line 39a or	43 Taxable income. Subtract fine 42 from line 41.						
39b or who can	If line 42 is more than line 41, enter -0			· · · · <u>· · · ·</u> · · · · · ·	· · · ·	43	0.
be claimed as a				c 962 electi			
dependent, see instructions.	· b	Form 4972				44	0,
mistructions.	45 Alternative minimum tax (see instructions). Atta	ach Form 6251				45	0.
All others:	46 Add lines 44 and 45					46	0.
Single or	47 Foreign tax credit. Attach Form 1116 if required					3 4	
Married filing separately,	48 Credit for child and dependent care expenses. Attach Form 2	441	48			14.4	
\$5,800	49 Education credits from Form 8863, line 23		49				
Married filing	50 Retirement savings contributions credit. Attach	Form 8880	50				
jointly or Qualifying	51 Child tax credit (see instructions)						
widow(er),	52 Residential energy credits, Attach Form 5695.		52		1	254	
\$11,600			53	45.00		图1	
Head of household,						54	
\$8,500	54 Add lines 47 through 53. These are your total c						^
	55 Subtract line 54 from line 46. If line 54 is more					55	0.
Other	56 Self-employment tax. Attach Schedule SE					56	
Taxes	57 Unreported social security and Medicare tax from Form: a	4137 b	8919			57	
	58 Additional tax on IRAs, other qualified retirement plans, etc.					58	A 9
	59 a Household employment taxes from Schedule H.					59 a	
	b First-time homebuyer credit repayment. Attach	Form 5405 if re	equired.			59b	
	60 Other taxes. Enter code(s) from instructions				6	50	
	61 Add lines 55-60. This is your total tax				6	61	0.
Daymanta	62 Federal income tax withheld from Forms W-2 ar				19.		
Payments	63 2011 estimated tax payments and amount applied from 2010			1,3	40.		
If you have a qualifying	64a Earned income credit (EIC)						
child, attach	b Nontaxable combat pay election. 64b						
Schedule EIC.	65 Additional child tax credit. Attach Form 8812				1		
	66 American opportunity credit from Form 8863, lin					-1.3	
						W	
	67 First-time homebuyer credit from Form 5405, lin						
	68 Amount paid with request for extension to file						
	69 Excess social security and tier 1 RRTA tax with		69				
	70 Credit for federal tax on fuels. Attach Form 4136	£1	70				
	71 Credits from Form: a 2439 b 8839 c 880	1 d 8885.	71				
	72 Add Ins 62, 63, 64a, & 65-71. These are your total pmts				7	72	1,559.
Refund	73 If line 72 is more than line 61, subtract line 61 from line 72.	This is the amoun	t you over	paid		73	1,559.
Retuild	74a Amount of line 73 you want refunded to you. If	Form 8888 is a	attached,	check here 🟲	7	74 a	1,559.
	► b Routing numberXXXXXXXXX	► c Type:	Check		ngs 💮		
Direct deposit?	► d Account number. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			·		; 1	
See instructions.	75 Amount of line 73 you want applied to your 2012 estimated		75			:	
A		on how to nav see	<del></del>	9	<b>&gt;</b> 7	76	
Amount			77				
You Owe	77 Estimated tax penalty (see instructions)		+	G-1			
Third Party	Do you want to allow another person to discuss this return with the	IRS (see instructio	ns)?	X Yes.	Compl	ete bel	ow. No
Designee	Physicanale	Phor		16\ 466-669	n Per	sonal ide	intification ► 18762
	name > SIDNEI IOSKOWIIS CEN	no.		16) 466-665			
Sign	Under penalties of perjury, I declare that I have examined this return a belief, they are true, correct, and complete. Declaration of preparer (o	ind accompanying ther than taxpaver)	schedules ) is based o	and statements, and t on all information of wh	o me bes uch prep	arer has	nowledge and any knowledge.
Here	Your signature	Date	Your occ				phone number
Joint return?			PHVC.	ICIAN			
See instructions.	Spouse's signature. If a joint return, both must sign.	Date		occupation		If the ID	S cant you are literative
Keep a copy	Spouse's signature it a joint return, both must sign.	Date	1 '	EWIFE		Protectio	S sent you are Identity on PIN.
or your records.	Print/Type preparer's name Printer's signature		Date		- 11	enter it ner	te (see inst)
			Care	Check	L		
Paid	SIDNEY YOSKOWITZ CPA		1	self e	mployed	!PU	01418762
Preparer's	Firm's name - SIDNEY YOSKOWITZ CPA, P	.C.					4000
Use Only	Firm's address - 445 NORTHERN BLVD STE 36			Fut	n's EIN		4090
-	GREAT NECK, NY 11021-480	4		Pho	ne no	(516	) 466-6650
							Econo 1040 (2011)

SCHEDULE	ĒΑ		Itemized Deduction	S			OMB No. 1545-0074
(Form 1040)	- / .		Remized Boulds.				2011
Department of the Internal Revenue S	Treasur Service	y (99)	► Attach to Form 1040. ► See Instructions for	Schedule	A (Form 1040).		Attachment Sequence No 07
Name(s) shown on	Form 1	040			Your s		urity number
JUAN D. 1	AND		ERINE REYES	10000000000000000000000000000000000000		1000000000	0937
Medical			on. Do not include expenses reimbursed or paid by others.		2 216		
and Dental	1		If and dental expenses (see instructions)  mount from Form 1040, line 38	1	2,316.		
Expenses	_		mount from Form 1040, line 38. 2 33, 922.	3	2,544.		
	3 4	Subtr	act line 3 from line 1. If line 3 is more than line 1, enter -0			4	0.
	<del>-</del> 5		and local (check only one box):	I		(64×-5)	
	,		come taxes, or	5	462.	10 4872 d 8 5 8 8 8	
Taxes You	i	XG	eneral sales taxes				
Paid	6		estate taxes (see instructions)	6	16,258.		
	7		nal property tax	7			
	8	Other	taxes. List type and amount *				
		7		1 _ <u>8</u>		9	16,720.
			nes 5 through 8	10	10,384.		10/1801
Interest You Paid	10 11	Home n	ntg interest and points reported to you on Form 1098	10	10,304.		
, , , , , , , , , , , , , , , , , , , ,	1.5	from w	hom you bought the home, see instructions and show that person's name,				
		identify	ing number, and address >				
Note.							
Your mortgage							
interest deduction may							
be limited (see				11			
instrs).			not reported to you on Form 1098. See instrs for spel rules	12			
			age insurance premiums (see instructions)	13			
	14		tment interest. Attach Form 4952 if required.	14			
		(See in	strs.)			15	10,384.
	15		nes 10 through 14	288888			
Gifts to	16		by cash or check. If you made any gift of \$250 or	16	750.		
Charity			see instrs		,,,,,		
If you made	17	Other	than by cash or check. If any gift of \$250 or see instructions. You must attach Form 8283 if				
a gitt and got a benefit			\$500	17			
for it, see	10		over from prior year				
instructions.	10	Carry	nes 16 through 18			19	750.
	13	Auu II	nes to unough to				
Casualty and Theft Losses	20	Cacus	aity or theft loss(es), Attach Form 4684. (See instructions.).			20	0.
		Unrein	nbursed employee expenses - job travel, union dues,	5000			
Job Expenses and Certain	4.1	job ec	ducation, etc. Attach Form 2106 or 2106-EZ if	1.00 (0.00) 1.00 (0.00)			
Miscellaneous Deductions		requir	ed. (See instructions.)				
Deductions			THE THE THE THE TAX AND THE	21			
			reparation fees	22			
	23		expenses - investment, safe deposit box, etc. List				
		type a	and amount >	23			
,				24			
		Add II	nes 21 through 23				
	25		mount from Form 1040, line 38	26			
			act line 25 by 2% (.02) act line 26 from line 24. If line 26 is more than line 24, enter			27	0.
	27 28		- from list in instructions. List type and amount ►				
Other Miscellaneous	20	VII (C)					
Deductions						28	0.
	29	Add th	ne amounts in the far right column for lines 4 through 28.				
Total	£3	Aiso,	enter this amount on Form 1040, line 40			29	27,854.
ltemized Deductions	30		elect to itemize deductions even though they are less than			E. S	
	30	deduc	tion, check here	- 	<u> </u>	<u></u>	

SCHEDULE B (Form 1040A or 1040)		)	Interest and Ordinary Dividends		OMB No. 1545-0074		
Department of the I		(99)	► Attach to Form 1040A or 1040. ► See Instructions.		Attachment Sequence I		ł
Name(s) shown on	eturn		You	ır socia	l security num		
JUAN D. A	ND C	ATHI	ERINE REYES		0937		
Part I	1		name of payer. If any interest is from a seller-financed mortgage and the buyer used property as a personal residence, see the instructions and list this interest first. Also,		VAn	nount	
Interest		sho	w that buyer's social security number and address *				
(See		_CH	ASE	1			292.
instructions for Form 1040A,							-
or Form 1040, line 8a,)							
Note, if your							-
Note, if you received a Form 1099-INT, Form				1			
1099-OID, or substitute statement from a brokerage							
firm, list the firm's name as the payer		-	VA - UNA NAME NAME NAME NAME NAME NAME NAME NA				
and enter the total			E DE SEE DE D				
that form.					ļ		
	2	Add	the amounts on line 1	2			292.
	3		udable interest on series EE and I U.S. savings bonds issued after 1989,				
			th Form 8815	3			202
			act line 3 from line 2. Enter the result here and on Form 1040A or Form 1040, line 8a	4	Δm	ount	292.
			name of payer >		Alli	Oun	
Part II	-	2.00	,				
Ordinary							
Dividends			10 book dark dies dies des des des des des des des des des d				
(See							
instructions for Form 1040A, or							
Form 1040,			T THE TOTAL THE				
line 9a.)			and the same and t				
			. The same state was not seen and was you are you was not sake the sale sale sale sale sale sale sale sal				
Note, If you received a Form				5			
1099-DIV or substitute statement			- 244 MA AND SEC 100				
from a brokerage firm, list the firm's			AND				
name as the payer and enter the							
ordinary dividends shown on that form.							
	6	Add the	e amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a	6			0.
			6 is over \$1,500, you must complete Part III.				
Part III Foreign	You n	nust c int; or	omplete this part if you <b>(a)</b> had over \$1,500 of taxable interest or ordinary dividends; <b>(b)</b> (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.	nad a	foreign	Yes	No
Accounts and Trusts		accou	y time during 2011, did you have a financial interest in or signature authority over a finan- int (such as a bank account, securities account, or brokerage account) located in a foreign structions.	cial In cou	intry?		Χ
		If 'Yes	s, are you required to file Form TD F 90-22.1 to report that financial interest or signature	autho	ority? See		
See			TD F 90-22.1 and its instructions for filing requirements and exceptions to those requirements and exceptions to those requirements and exceptions to those requirements.				
nstructions.)		-	are required to file Form TD F 90-22.1, enter the name of the foreign country where the	шапс	,idi		
	8	During	nt is located  2011, did you receive a distribution from, or were you the grantor of, or transferor to, a company to the form 3520. See instructions	foreiç	gn trust?		Х
RAA For Paper				(For	m 1040A or	1040)	

FDIA0401L 11/15/11

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

				Attachment	Cagua	noa No	. 13				Page 2
	edute: E. (Form. 1040). 2011. e(s) shown on return. Do not enter name and social security null	mber if shown on Page 1.		Attacrimen		social s		numbe	r		i age z
	AN D. AND CATHERINE REYES						093	37			
	tion: The IRS compares amounts reported on yo	ur tay return with amou	nts shown	on Schedu	e(s) K	1.	0 3 0				
	t II Income or Loss From Partners	hins and S Corpor	ations								
(E.M.	Note. If you report a loss from an at-risk 28 and attach Form 6198. See instruction	activity for which any at	mount is n	ot at risk, y	ou mus	t check	k the	рох іг	column (	(e) on	line
27	Are you reporting any loss not allowed in a pric loss from a passive activity (if that loss was no If you answered 'Yes,' see instructions before	or year due to the at-risk t reported on Form 8582 completing this section	or basis l ), or unrei	mitations, mbursed pa	a prior y artnersh	year un up expe	nallow	ed ?	Yes	X	No
	If you allowered Tes, see itsudctions before	conspicting the section.	(b)	Enter P	(-) () h	-1. :(	(-1	\ Eme	lavor	(a) C	heck if
28	(a) Name		for pa	rtnership; for S poration	(c) Che forei partne	gn		) Emp entific numb	ation	any a	imount at risk
-	424 AVALINE LLC		- (01)	P	Т	-	-		3603		
	424 AVALINE LLC 424 AVALINE LLC		_	P		<del>  -</del>			3603		
-	91 AVALINE LLC			P	-				3789		
	91 AVALINE LLC			P					3789		
	Passive Income and Loss			N	onpass				988		
	(f) Passive loss allowed	(g) Passive income	(h) Nonp	assive loss	(i	) Section	on 179	9	() No	mpass me fro	ive
	(attach Form 8582 if required)	from Schedule K-1		nedule K-1	exp	ense d	m 456	2	Sche	dule K	(-1
Α			-								
В											
С											
D											
	Totals										
ŀ	Totals										
30	Add columns (g) and (j) of line 29a							30			
31	Add columns (f), (h), and (i) of line 29b							31			
32	Total partnership and S corporation income or include in the total on line 41 below.	(loss). Combine lines 3	0 and 31.	Enter the re	sult he	re and		20			
	include in the total on line 41 below						<u>ا نننا</u>	32			
Pai	t III Income or Loss From Estates	and Irusts									
100	2.230.40.40.								(b) Emr	lover l	ID no
33		(a) Name							<b>(b)</b> Emp	oloyer I	D no.
Line and the second									<b>(b)</b> Emp	oloyer	ID no.
33		(a) Name				Non	nassi	ive In			D no.
33 A	Passive Income	(a) Name			(0)(				come and	Loss	
33 A		(a) Name and Loss	(d) Pass from Sci	ive income nedule K-1	(e) [	Non Deduction Sche	on or	loss	come and	Loss ner inco	ome
33 A	Passive Income	(a) Name and Loss	(d) Pass from Sci	ive income nedule K-1	(e) [	eduction	on or	loss	come and	Loss ner inco	ome
33 A	Passive Income	(a) Name and Loss	(d) Pass from Sci	ive income nedule K-1	(e) [	eduction	on or	loss	come and	Loss ner inco	ome
33 A B	Passive Income	(a) Name and Loss	(d) Pass from Sci	ive income nedule K-1	fron	eduction	on or dule	loss	come and	Loss ner inco	ome
33 A B A B 34 a	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals	(a) Name	from Sci	nedule K-1	`froi	eduction Sche	on or dule	loss K-1	come and	Loss ner inco	ome
33 A B A B 34 a	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a	(a) Name	from Sch	nedule K-1	`froi	eduction Sche	on or dule	loss K-1	come and	Loss ner inco	ome
33 A B A B 34 a	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals	(a) Name	from Sch	nedule K-1	`froi	eduction Sche	on or dule	loss K-1	come and	Loss ner inco	ome
33 A B A B 34a k	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b.  Total estate and trust income or (loss). Combin	(a) Name  and Loss  wed  ne lines 35 and 36. Ente	fróm Sci	nedule K-1	fron	educti m Sche	on or edule	35 36	come and (f) Otr from So	Loss ner inc chedul	ome
33 A B A B 34 a b 35 36 37	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b.  Total estate and trust income or (loss). Combin	(a) Name  and Loss  wed  ne lines 35 and 36. Ente	from Sci	onduits	(REM	Deduction Sche	on or edule	35 36 37 3idu	(f) Otr from Se	Loss ner incochedul	ome e K-1
33 A B A B 34 a b 35 36 37	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b	(a) Name  and Loss  wed  ne lines 35 and 36. Ente	r the	nedule K-1	(REM	educti m Sche	on or	35 36 37 <b>sidu</b>	(f) Otr from Se	Loss ner incichedul chedul	ome e K-1
33 A B A B 34 a b 35 36 37	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b  Total estate and trust income or (loss). Combine result here and include in the total on line 41 bit income or Loss From Real Est	(a) Name and Loss wed  ne lines 35 and 36. Ente	r the	Conduits	(REM	ICs) -	on or	35 36 37 <b>sidu</b>	come and  (f) Otr from So	Loss ner incichedul chedul	ome e K-1
33 A B A B 342 35 36 37 Part	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b  Total estate and trust income or (loss). Combinate of the columns of the	ne lines 35 and 36. Ente elow	r the  stment C (c) Exce from Sc line 2c (se	Conduits ss inclusion hedules Q, instructions)	(REM (d) Sch	ICs) Taxabla edules	Re incos) from Q, lin	35 36 37 <b>sidu</b>	come and  (f) Otr from So	Loss ner incichedul chedul	ome e K-1
33 A B A B 34 35 36 37 Pat 38	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b  Total estate and trust income or (loss). Combin result here and include in the total on line 41 b  (a) Name  Combine columns (d) and (e) only. Enter the result in the columns (d) and (e) only.	ne lines 35 and 36. Ente elow	r the  stment C (c) Exce from Sc line 2c (se	Conduits ss inclusion hedules Q, instructions)	(REM (d) Sch	ICs) Taxabla edules	Re incos) from Q, lin	35 36 37 <b>sidu</b> e 1b	come and  (f) Otr from So	Loss ner incichedul chedul	ome e K-1
33 A B A B 342 t 35 36 37 Pat	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b  Total estate and trust income or (loss). Combine result here and include in the total on line 41 b  (a) Name  Combine columns (d) and (e) only. Enter the result of the columns (d) and (e) only. Enter the result of the columns (d) and (e) only.	ne lines 35 and 36. Ente elow  (b) Employer identification number esult here and include in	r the stment C (c) Exce Irom Sc line 2c (se	Conduits so inclusion hedules Q, instructions)	(REM (d) Sch	ICs) - Taxabla edules	on or dule  - Re e inco Q, lin	35 36 37 <b>sidu</b> e 1b	come and  (f) Otr from So	Loss ner incichedul chedul	ome e K-1
33 A B A B 34 35 36 37 Pat 38	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b  Total estate and trust income or (loss). Combin result here and include in the total on line 41 b  (a) Name  Combine columns (d) and (e) only. Enter the retained or the state of the s	ne lines 35 and 36. Enterline (b) Employer identification number (c) Also, complete line (c) 35. Also, complete line (c) 37, 39, and 40. Enter the	r the stment (c) Exce Irom Sc line 2c (se	conduits ss inclusion hedules Q, instructions) on line 41 b	(REM (d) Sch	ICs) - Taxabla edules	on or dule  - Re e inco Q, lin	35 36 37 sidu me n e 1b	come and  (f) Otr from So	Loss ner incichedul chedul	ome e K-1
33 A B B 34a b 35 36 37 Par 38 9 Par 40 41	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b  Total estate and trust income or (loss). Combin result here and include in the total on line 41 b  IN Income or Loss From Real Est  (a) Name  Combine columns (d) and (e) only. Enter the result farm rental income or (loss) from Form 48.  Total income or (loss). Combine lines 26, 32, 3. Form 1040, line 17, or Form 1040NR, line 18.  Reconciliation of farming and fishing income 1835. Lines 1835. Li	(a) Name  and Loss  wed  me lines 35 and 36. Enterelow  ate Mortgage Investigentification number  esult here and include in a second se	r the stment C (c) Exce from Sc line 2c (se the total the total result he	conduits ss inclusion hedules Q, instructions) on line 41 b	(REM (d) Sch	ICs) - Taxabla edules	on or dule  - Re e inco Q, lin	35 36 37 36 37 38 39	come and  (f) Otr from So	Loss ner incichedul chedul	ome e K-1
33 A B B 34 & B 35 36 37 Part 38 9 Part 40 41 42	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b  Total estate and trust income or (loss). Combin result here and include in the total on line 41 b  (a) Name  Combine columns (d) and (e) only. Enter the result farm rental income or (loss) from Form 48:  Total income or (loss). Combine lines 26, 32, 3 Form 1040, line 17, or Form 1040NR, line 18.  Reconciliation of farming and fishing income and fishing income reported on Form 4835, line box 14, code B; Schedule K-1 (Form 1120S), b (Form 1041), line 14, code F (see instructions)	(a) Name  and Loss  wed  ne lines 35 and 36. Enterelow  ate Mortgage Investigation number  (b) Employer identification number  esuit here and include in a service and 40. Enter the service and 40. Enter the service 7; Schedule K-1 (Form the 27; Schedule K-1 (Form	r the stment C (c) Exce from Sc line 2c (se the total the total result he	conduits ss inclusion hedules Q, instructions) on line 41 b	(REM (d) Sch	ICs) - Taxabla edules	on or dule  - Re e inco Q, lin	35 36 37 36 37 38 39	come and  (f) Otr from So	Loss ner incichedul chedul	ome e K-1
33 A B B 34a b 35 36 37 Par 38 9 Par 40 41	Passive Income  (c) Passive deduction or loss allo (attach Form 8582 if required)  Totals  Totals  Add columns (d) and (f) of line 34a  Add columns (c) and (e) of line 34b  Total estate and trust income or (loss). Combin result here and include in the total on line 41 b  (a) Name  Combine columns (d) and (e) only. Enter the result farm rental income or (loss) from Form 48:  Total income or (loss). Combine lines 26, 32, 3 Form 1040, line 17, or Form 1040NR, line 18.  Reconciliation of farming and fishing income and fishing income reported on Form 4835, line by 14, code 8. Schedule K-1 (Form 1120S), bey 14, code 8. Schedule K-1 (Form 1120S), bey 14. code 8. Schedule K-1 (Form 1120S), beginning and fishing income reported on Form 4835, line bey 14. code 8. Schedule K-1 (Form 1120S), beginning and fishing income reported on Form 120S).	(a) Name  and Loss  wed  me lines 35 and 36. Enterelow  ate Mortgage Investigation number  (b) Employer identification number  esult here and include in a state with the state of the stat	r the stment C (c) Exce Irom Sc line 2c (se the total 2 below result he 1065), redule K-1	Conduits ss inclusion hedules Q, instructions) on line 41 b	(REM (d) Sch	ICs) - Taxabla edules	on or sidule  Re e incos) from Q, lin	35 36 37 sidu ome ne 1b 39 40	come and  (f) Otr from So	er come (les Q, l	ome e K-1

Form <b>8582</b>	Passive Activity Loss Lin	nitations	OMB No. 1545-1008
roan OJOL			2011
Department of the Treasury Internal Revenue Service (99)	► See separate instructions ► Attach to Form 1040 or Form	s. 1041.	Attachment Sequence No. 88
Name(s) shown on return		identify	ring number
JUAN D. AND CATH			0937
****	ve Activity Loss		
	plete Worksheets 1, 2, and 3 before completing Part I.		
	es With Active Participation (For the definition of active part Estate Activities in the instructions.)	icipation, see Special	
1a Activities with net inc	ome (enter the amount from Worksheet 1, column (a))	1a	-
b Activities with net loss	s (enter the amount from Worksheet 1, column (b))	1 b	
	losses (enter the amount from Worksheet 1, column (c))	1c	_
	and 1c		1d
	Deductions From Rental Real Estate Activities		
	tion deductions from Worksheet 2, column (a)	2a	
column (b)	commercial revitalization deductions from Worksheet 2,	2ь	
			2 c
All Other Passive Activities		1	
3 a Activities with net inco	me (enter the amount from Worksheet 3, column (a))	3a	
b Activities with net loss	(enter the amount from Worksheet 3, column (b))	зы -35,790.	
c Prior years unallowed	losses (enter the amount from Worksheet 3, column (c))	3c	
	and 3c		3d -35,790.
4 Combine lines 1d, 2c, losses are allowed, incon the forms and sche	and 3d. If this line is zero or more, stop here and include the cluding any prior year unallowed losses entered on line 1c, 2 dules normally used	nis form with your return; all 2b, or 3c. Report the losses	4 -35,790.
If line 4 is a loss and:	<ul> <li>Line 1d is a loss, go to Part II.</li> </ul>		
	<ul> <li>Line 2c is a loss (and line 1d is zero or more), skip Pa</li> </ul>	rt II and go to Part III.	
	<ul> <li>Line 3d is a loss (and lines 1d and 2c are zero or more</li> </ul>	e), skip Parts II and III and go	to line 15,
Caution; If your filing status Part II or Part III. Instead, g	is married filing separately and you lived with your spouse o to line 15.	at any time during the year, o	do not complete
*	wance for Rental Real Estate Activities With Au numbers in Part II as positive amounts. See the instructions	•	The second secon
	e loss on line 1d or the loss on tine 4	TOT OIL ONG THE	5
	ried filing separately, see the instructions	6	
	d gross income, but not less than zero (see instructions).	7	
•	er than or equal to line 6, skip lines 8 and 9, enter -0-		
8 Subtract line 7 from line		8	
	(5). Do not enter more than \$25,000. If married filing separ		9
10 Enter the smaller of lin			10 0.
If line 2c is a loss, go to	o Part III. Otherwise, go to line 15.	·	
	vance for Commercial Revitalization Deduction	ns From Rental Real E	state Activities
Note: Enter all n	umbers in Part III as positive amounts. See the example fo	r Part II in the instructions.	
11 Enter \$25,000 reduced	by the amount, if any, on line 10. If married filing separatel	y, see instructions	11
	4		12
	mount on line 10		13
	ne 2c (treated as a positive amount), line 11, or line 13.		14
Part IV   Total Losses			
15 Add the income, if any,	on lines 1a and 3a and enter the total		15
	om all passive activities for 2011. Add lines 10, 14, and 15, ne losses on your tax return.	See the instructions to	16
BAA For Paperwork Reducti	on Act Notice, see instructions.		Form 8582 (2011)

Form 8582 (2011) JUAN D. AND CATH Caution: The worksheets must be filed with you		a conv t	for your reco	reic		09	37 Page
Worksheet 1 – For Form 8582, Lines				105.			
The state of the s		nt year		Prior y	ears	Overa	all gain or loss
Name of activity	(a) Net income (line 1a)	<del></del>		(c) Unallowed loss (line 1c)		(d) Gain	(e) Loss
Total. Enter on Form 8582, lines 1a, 1b, and 1c							
Worksheet 2 - For Form 8582, Lines	2a and 2b (See	nstructi	ons.)				
Name of activity			(a) Curr deduction	ent year ns (line 2a)	, ·	) Prior year unallowed ctions (line 2b)	(c) Overall loss
Total. Enter on Form 8582, lines 2a and 2b			tructions.)				
		nt year		Prior ye	ears	Overa	Il gain or loss
Name of activity	(a) Net income (line 3a)	(b)	Net loss ine 3b)	(c) Unalle loss (lin		(d) Gain	(e) Loss
424 AVALINE LLC			16,343.				16,343
124 AVALINE LLC			3,984.				3,984
91 AVALINE LLC 91 AVALINE LLC			12,433. 3,030.				12,433 3,030
Total. Enter on Form 8582, lines 3a, 3b, and 3c.			35,790.				
Worksheet 4 — Use this worksheet if an a	mount is shown o	on For	m 8582, lin	e 10 or 14	(See ins	tructions.)	
Name of activity	Form or schedule and line number to be reported on (see instructions)		(a) Loss	(b) Ratio		(c) Special allowance	(d) Subtract column (c) from column (a)
						PATAMENT AND ADDRESS OF THE PA	
						The state of the s	
Total				1.00	)		
Worksheet 5 — Allocation of Unallow	ed Losses (See i	nstructi	ons.)				
Name of activity	Form or sche and line num to be reporte (see instructi	nber ed on		(a) Loss		(b) Ratio	(c) Unallowed loss
24 AVALINE LLC	Sch E I			16,343.		0.456635	16,343.
24 AVALINE LLC	Sch E I		4 100	3,984.		0.111316	3,984.
1 AVALINE LLC	Sch E I			12,433.		0.347388	12,433.
1 AVALINE LLC	Sch E I	n 28	B. B	3,030.		0.084661	3,030.
otal		-		35,790.		1.00	35,790

Form 8582 (2011)

Form 8582 (2011) JUAN D. AND CATH	ERINE REYES					0937	Page 3
Worksheet 6 - Allowed Losses (See II							
Name of activity	and line nu to be report	Form or schedule (a) and line number Loss to be reported on (see instructions)		Una	(b) llowed loss	(c) Allowed loss	
424 AVALINE LLC	Sch E	Ln 28		16,343.		16.343.	0,
424 AVALINE LLC	Sch E			3,984.		3,984.	0.
91 AVALINE LLC	Sch E			12,433.		12,433.	0.
91 AVALINE LLC	Sch E	Ln 28		3,030.		3,030.	0.
Total		,,,, <b>&gt;</b>		35,790.		35,790.	0.
Worksheet 7 - Activities With Losses		Two or M	ore For	ms or Sci	redul	es (See instruction	ns.)
Tronslect / Activities (Har Eosse	(a)	(b		(c) Ratio		(d) Unallowed loss	(e) Allowed loss
Manager of modified	A CONTRACTOR OF THE PARTY OF TH	1		natio		Orianowed 1033	1 Allowed 1033
Name of activity		(Q. 11 to C)			4.7.3		
Form or schedule and line number to be reported on (see instructions)							
1a Net loss plus prior year unallowed loss from form or schedule							
b Net income from form or schedule		rusiki	48000				rinend-karaki
c Subtract line 1b from line 1a. If zero or les	s, enter -0 🟲			77	50000		<u> </u>
Form or schedule and line number to be reported on (see instructions)							
1 a Net loss plus prior year unallowed loss from form or schedule.							
b Net income from form or schedule •	c enter .0.					yeavillili ise	
c Subtract line 1b from line 1a. If zero or les	s, enter -U-				27944		
Form or schedule and line number to be reported on (see instructions)							
1a Net loss plus prior year unallowed loss from form or schedule							
b Net income from form or schedule	antor D						
c Subtract line 1b from line 1a. If zero or les	s, enter -u		19112000				
Form or schedule and line number to be reported on (see instructions)							
1a Net loss plus prior year unallowed loss from form or schedule	-						
b Net income from form or schedule ► c Subtract line 1b from line 1a. If zero or les	s enter .0.				DOM:		
Total			0.	1.00		0.	0.
							A
Name of activity		PHYSON.			77.73.23		
Form or schedule and line number to be reported on (see instructions)							
1a Net loss plus prior year unallowed loss from form or schedule							
b Net income from form or schedule			APENIA.				
c Subtract line 1b from line 1a. If zero or les	s, enter -0-				2017 S 2000		
Form or schedule and line number to be reported on							
(see instructions)  1a Net loss plus prior year unaflowed loss from form or schedule	pages entre delle delle del			erg gradië Veganië			
b Net income from form or schedule							
c Subtract line 1b from line 1a. If zero or les	s, enter 0						
Form or schedule and line number to be reported on							
(see instructions)  7 a Net loss plus prior year unallowed loss from form or schedule	taro kulimbili.						
b Net income from form or schedule							
c Subtract line 1b from line 1a. If zero or less	s, enter -0					المراجعة	
Form or schedule and line number to be reported on							
(see instructions)							
* *1 *1	1		77 BM - 11 (c		10 43		
1a Net loss plus prior year unaflowed loss from form or schedule.			34 V. I				
from form or schedule.  b Net income from form or schedule							
from form or schedule.  b Net income from form or schedule.  c Subtract line 1b from line 1a. If zero or less				1 00		•	0
from form or schedule.  b Net income from form or schedule	s, enter -0		0.	1.00		0.	0 . Form <b>8582</b> (2011)